05-10-06

PART B - FEE(S) TRANSMITTAL

MAY 1 1 2006 (5)			or <u>F</u> a	Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (571)-273-2885 ICATION FEE (if required). Blocks 1 through 5 should be completed where n of maintenance fees will be mailed to the current correspondence address as correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for					
appropriate AdP further corrindicated unless corrected b maintenance fee notifications	respondence including the lelow or directed otherwise s.	Patent, advance or in Block 1, by (a	ders and notifica) specifying a ne	tion of maintenance fees w correspondence addre	s will be mailed to the current ss; and/or (b) indicating a sep	arate "FEE ADDRESS" for			
CURRENT CORRESPONDENCE	E ADDRESS (Note: Use Block 1 for	any change of address)	Fee(s) Transmittal.	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
EDWARDS & Al P.O. BOX 55874 BOSTON, MA 022	NGELL, LLP		I hereby certify that States Postal Service	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
05/15/2006 EAREGAY2 0000	•	16				(Depositor's name)			
01 FC:2501 700.00 02 FC:8001 30.00				(Signature)					
APPLICATION NO. FILING DATE			FIRST NAMED IN	VENTOR	ATTORNEY DOCKET NO.	OCKET NO. CONFIRMATION NO.			
♠ 09/980,416	· . l			sen	71974-49056	, 2934			
TILE OF INVENTION: MI	ULTIPLE ACCESS SYSTE	EM AND METHOI	D FOR MULTIB	EAM DIGITAL RADIÖ	SYSTEMS				
APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE			
nonprovisional	rovisional YES			\$0	\$700	06/08/2006			
EXAMINER		ART UNIT		CLASS-SUBCLASS					
VO, DON I	NGUYEN	2631		375-260000					
Address form PTO/SB/12 "Fee Address" indicati PTO/SB/47; Rev 03-02 o Number is required.	ion (or "Fee Address" Indica or more recent) attached. Use	ation form e of a Customer	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
	an assignee is identified be 37 CFR 3.11. Completion	elow, no assignee	data will appear Γ a substitute for	on the patent. If an assi	gnee is identified below, the d	locument has been filed for			
Please check the appropriate	assignee category or catego	ries (will not be pri	inted on the pater	t): 🔲 Individual 🚉	Corporation or other private gr	oup entity Government			
4a. The following fee(s) are on the last of the last o	mall entity discount permitte		4b. Payment of Fee(s): ☐ A check in the amount of the fee(s) is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☑ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number04=1105 (enclose an extra copy of this form).						
5. Change in Entity Status	(from status indicated above MALL ENTITY status. See				ALL ENTITY status. See 37 C				
			* * *		usly paid issue fee to the applicate egistered attorney or agent; or the				
Authorized Signature	Peter Man	~			fay 10, 2006				
Typed or printed name	Peter J. Manus			Registration	1 No. 26,766				
Alexandria, virginia 22313-1	1430.				y the public which is to file (and 2 minutes to complete, including comments on the amount of the different of the comment of the commissioner of				

PTO/SB/17 (01-06)
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Under the Paperwork Red	duction Act of 1995	, no person are required t	o respond to a collect				control number					
Fees pursuant to the Consolid	dated Appropriatio	ns Act, 2005 (H.R. 4818).		Complete if Known								
FEE TR	ANSM	ΙΤΤΔΙ	Application Nu		09/980,416-Conf. #2934							
	Filing Date		February 4, 2002									
Foi	r FY 2006	Ď	First Named In		Peter Monsen, Ph.D.							
			Examiner Nam	Examiner Name D. N. Vo								
X Applicant claims sm	all entity status. S	See 37 CFR 1.27	Art Unit 2631									
TOTAL AMOUNT OF PA	YMENT	(\$) 730.00	Attorney Docket No. 49056(71974)									
METHOD OF PAYME	NT (check all ti	nat apply)										
Check Credit Card Money Order None Other (please identify):												
x Deposit Account Deposit Account Number: 04-1105 Deposit Account Name: Edwards Angell Palmer & Dodge LLP												
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)												
x Charge fee	(s) indicated bel	ow .	Char	ge fee(s) indi	cated below, ex	ccept for t	he filing fee					
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17												
FEE CALCULATION	(All the fees I	oelow are due up	on filing or ma	y be subjec	t to a surcha	rge.)						
1. BASIC FILING, SEAR	CH, AND EXAM	INATION FEES										
			EARCH FEES Small Entity		ATION FEES							
Application Type	Fee (\$)	Small Entity Fee (\$) Fee		Fee (\$)	Small Entity Fee (\$)	Fees	Paid (\$)					
Utility	300	150 500	250	200	100							
Design	200	100 100	50	130	65							
Plant	200	100 300	150	160	80							
Reissue	300	150 500	250	600	300							
Provisional	200	100	0	0	0							
2. EXCESS CLAIM FEES	;						Small Entity					
Fee Description						<u>Fee (\$)</u>	Fee (\$)					
Each claim over 20 (inclu	-					50	25					
Each independent claim	•	g Keissues)				200 360	100 180					
Multiple dependent clain		, (a)	D=:4 (6)	84	Minto Donando							
		ee (\$)Fee			Itiple Depende (\$)	ent Claims Fee Paid (
- 20 = HP = highest numer of total cl	aims paid for, if gre	= ater than 20.		rec	: 741	-cc r ala (57					
1			Paid (\$)				_					
-3=	x	=										
HP = highest numer of indepe	endent claims paid f	or, if greater than 3.										
3. APPLICATION SIZE F												
If the specification and	drawings excee	d 100 sheets of pape	r (excluding elec	tronically file	ed sequence or	computer	0					
listings under 37 CFI sheets or fraction the	R 1.52(e)), the a	application size fee of S.C. 41(a)(1)(G) an	d 37 CFR 1.16(s)	ior sman en	illy) for each ac	Juliional 3	U					
Total Sheets	Extra Sheets		additional 50 or fr		Fee (\$)	<u>Fee</u>	Paid (\$)					
		/50	(round up to a wi									
4. OTHER FEE(S)						Fees	Paid (\$)					
Non-English Specific	ation, \$130 fee	e (no small entity dis	count)									
Other (e.g., late filing		00.00										
<u></u>		001 Printed copy o	patent w/o cold	or		3	0.00					
SUBMITTED BY	// A											
Signature	1luh,	<u></u>	Registration No. (Attorney/Agent) 26,76		Telephone	(617) 439-4444						
Name (Print/Type) Peter J	. Manus				Date	May 10	, 2006					

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service as Express Mail, Label No. EV756032927US, on the date shown below in an envelope addressed to:

Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Dated: May 10, 2006

Signature: (Laurie Brown)